

STATE PERSONNEL BOARD
1015 L Street, Sacramento
May 15, 1942

Sacramento, May—The California State Personnel Board has announced that applications will be received from citizens throughout the United States for the position of Chief, Bureau of Laboratories, (entrance salary \$360 a month) and Assistant Chief, Bureau of Laboratories, (entrance salary \$320 a month) in the State Department of Public Health.

The requirements for the position of Chief are graduation from a college of medicine, five years' experience in a laboratory devoted to bacteriological and chemical work, and ability to obtain a medical certificate in the State of California.

The entrance requirements for the position of Assistant Chief are the equivalent of three years of graduate study in bacteriological science and two years' experience in a public health laboratory in a biologic producing laboratory, in an educational institution laboratory producing, testing, or analyzing biologics, or as a teacher of bacteriology in a university. Application forms and information may be obtained from the California State Personnel Board, 1015 L Street, Sacramento, California. Applications must be filed by June 30, 1942.

Concerning Attendance at Del Monte in Eye, Ear, Nose and Throat Section.

Los Angeles, May 11, 1942.

To the Committee on Scientific Work:

The meeting of the Eye and Ear Section of the State Medical Association was a grand success. I heard many favorable comments on the value of the papers read and universal praise for the new meeting place. . . .

This was the second largest registration the Section has had. In 1927 at the Los Angeles Biltmore, 145 registered and this year 132 registered. With twenty-three of the Section's members in the Army or Navy, from Southern California alone, this is quite a record. The daily attendance was good, 84 on Monday, 65 on Tuesday and 74 on Wednesday. . . .

With kindest regards, sincerely,

L. M.

Concerning Decontamination Stations.*

CALIFORNIA STATE COUNCIL OF DEFENSE
San Francisco, April 13, 1942.

George H. Kress, M.D., Editor,
California and Western Medicine.

Dear Doctor Kress:

May I ask you to give publicity to an error which has appeared in two of the publications of the Office of Civilian Defense and to the correction thereof.

760 Market St.

Sincerely yours,
MORTON R. GIBBONS, M.D.,
Deputy Chief,
Emergency Medical Service,
State Defense Council.

(COPY)

March 21, 1942.

Since publication of the Office of Civilian Defense handbooks, "First Aid in the Prevention and Treatment of Chemical Casualties" and "Protection Against Gas," further experiments have shown that the 2 per cent solution of hydrogen peroxide for the treatment of the eyes following Lewisite burns may cause injury. The recommendations of the Chemical Warfare Service now are that a single instillation of a 0.5 per cent solution of

hydrogen peroxide or 0.5 per cent solution of potassium permanganate be used in the eyes as soon as possible after contamination with Lewisite. For skin decontamination 8 per cent hydrogen peroxide has been found satisfactory and stable. In planning decontamination stations, the Office of Civilian Defense now recommends that irrigation of eyes of contaminated persons be provided as soon as possible. The schematic sketch previously published shows eye irrigation in the dressing room whereas this should be provided in the shower room before the individual baths. Delay in this regard may cause serious results if the eyes have been contaminated with mustard or Lewisite.

Concerning Fraternal Delegate from Arizona State Medical Association.

THE ARIZONA STATE MEDICAL ASSOCIATION
Phoenix, Arizona

April 30, 1942.

Dear Doctor Kress:

The cordial invitation from the California Medical Association to send a fraternal delegate to your 71st annual session was duly received. We regret that we can only send our greetings to you this time, as we do not know of any one of our members who will find it possible to attend the Del Monte meeting.

We are busily preparing for our 51st annual meeting at which we expect to have the pleasure of having your President attend as the official representative of the California Medical Association. Our meeting will be May 25 to 29 at Prescott, Ariz. Since we will have Dr. Rogers, as stated, and four other of your members on our scientific program, we will not ask for appointment of any other fraternal delegates.

Trusting that you will have a profitable and pleasant meeting,

Arizona State Medical Association,

Sincerely,

W. WARNER WATKINS, M.D., Secretary.

Concerning Mis-use of Name of Dr. Morris Fishbein.

A recent newspaper advertisement by a San Francisco chiropractor played up the name of Dr. Fishbein in black face type, in a manner to lead the unsophisticated into believing that the chiropractor and Doctor Fishbein had close professional interests. The Editor of CALIFORNIA AND WESTERN MEDICINE sent the clipping to Doctor Fishbein, whose reply follows:

(COPY)

THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION
535 North Dearborn Street
Chicago

April 25, 1942.

Dear Doctor Kress:

I have written to every chiropractor who has been using my name, telling them my name is copyrighted and that they must not make reference to me. It is a pity that I have become so famous that they want to use my name in their advertising.

Sincerely yours,

MORRIS FISHBEIN.

Concerning 7th U. S. Infantry Band and C. M. A. Annual Session

(COPY)

HEADQUARTERS 1ST MEDICAL REGIMENT
Fort Ord, California

May 29, 1942.

My dear Dr. Kress:

Thank you very much for your kind letter. I have given the photograph (photograph of the 7th U. S. In-

tantry Band, taken on May 3d at Hotel Del Monte) to Colonel Robert Macon, 7th Infantry, now on this Post. I am sure he will appreciate it very much. He told me some time ago that the Band has reported to him they had been royally treated and that the 1st Medical Regiment and the California Medical Society were tops as far as they were concerned. We appreciate your thanks. Whatever we accomplished during the State Medical meeting was possible only because of the hearty coöperation of yourself, your associates and the hotel management. All of this made the job very easy and the duty very pleasant. . . .

Most sincerely,

HARRY H. TOWLER,
Colonel, Medical Corps,
Commanding.

Concerning Death Certificates.

CALIFORNIA FUNERAL DIRECTORS ASSOCIATION
Pasadena, April 20, 1942.

California Medical Association,
Room 2004,
450 Sutter Street,
San Francisco, California.
Gentlemen:

At the suggestion of Dr. William A. Swim, we are forwarding to you herewith 2 copies of our Bulletin 42-17, regarding "Tires and Death Certificates."

Although coöperation between physicians and morticians is always in order, it is of greater importance now that conservation of time, energy and tires is necessary in the interests of national defense.

May we have your coöperation in the publication of this bulletin or copy to the same effect, in the next issue of your journal?

Please be assured that you may count upon any coöperation we can render to the California Medical Association at any time.

P. O. Box 22.

Yours very sincerely,

J. WILFRED CORR.

(COPY)

To Members of the
California Funeral Directors Association.
Subject: Tires and Death Certificates.

The California law pertaining to Vital Statistics includes the following Sections of the California Health and Safety Code:

10400. The medical certificate shall be made and signed by the physician, if any, last in attendance on the deceased except in the following cases:

- (a) Where the attending physician is unable to state the cause of death.
- (b) Where death is the result of an accident.
- (c) Where a person has been killed or has committed suicide.
- (d) Where an injury is a contributing cause of death.
- (e) Where the death occurred under such circumstances as to afford a reasonable ground to suspect that it was caused by the criminal act of another.

1041. The physician shall within fifteen hours after the death deposit the certificate at the place of death, or deliver it to the attending funeral director, at his place of business or at the office of the physician.

10452. The death certificate shall be signed by the attending physician, if any, or by the coroner or other proper official either directly or as directed by the local registrar, giving the medical certificate of the cause of death and other particulars necessary to complete the record.

10454. The complete certificate shall be presented to the local registrar in order to obtain a permit for interment, removal or other disposition of the body.

For several reasons it is important to the surviving families and to the mortician who endeavors to serve them properly, that the medical section of the death

certificate be completed as quickly as possible. Frequently someone from the mortuary makes two or three trips to contact the physician before this medical information is certified. Now the physicians who have not been called into military service are required to work longer hours and on a schedule of increased tempo. Certainly the morticians want to extend to them every possible coöperation.

However, morticians are now faced with a serious problem of being unable to obtain tires and therefore they must conserve tires to perform all essential services for the longest possible time. If some plan can be developed with each physician or through the local Medical Association to have the medical section of death certificates completed promptly and made available to a mortuary representative, by telephone appointment or otherwise, so that they can be obtained by making one call, the coöperation would not only be appreciated by the mortician but would also serve the interest of National Defense.

It is suggested that morticians throughout the State, individually or through their local association, submit this matter to the physicians in their communities, in an appeal for greater coöperation. Suggestions for efficient coöperation on the part of both physicians and morticians may be developed. Such suggestions should be forwarded to this office and to the office of the Medical Association.

J. WILFRED CORR,
Executive Secretary.

MEDICAL EPONYM

Murphy Drip

Dr. John Benjamin Murphy (1857-1916) spoke on "Diffuse Suppurative Peritonitis" before the American Association of Obstetricians and Gynecologists on September 21, 1906. His remarks included some mention of his new method of proctoclysis, and in the subsequent discussion he described it as quoted below from the *Transactions of the American Association of Obstetricians and Gynecologists* (19:184, 1906):

"An ordinary vaginal douche tip should be used, with three openings, so that the water can flow into one and the intestinal gas come out of the other. If we use a single opening tip, gas will not bubble back into the can, and the passing of gas is important, otherwise the fluid will be expelled in the bed when the patient attempts to pass the gas. The elevation of the can should be from four to six inches above the anal level. The nurse must be instructed to watch the patient closely and not allow any more than one pint and a half of the saline solution to flow in forty minutes to one hour. The tube can be strapped permanently to the leg of the patient with adhesive plaster, the fountain syringe being at the head of the bed, and a hot water bag used to keep the solution warm. Every two hours the nurse pours in hot saline water. There is no irritation of the rectum. The patient may go to sleep while the irrigation is being carried on, as the tube is not taken out for days. It is merely absorption of the fluid by the bowel. The speed of the flow must not be controlled by a forcep in the tube, but by the elevation of the can."—R. W. B., in *New England Journal of Medicine*.

Athlete's Foot.—A mixture of carbolic acid and camphor has been found effective in the treatment of "athlete's foot," Edward Francis, M. D., Washington, D. C., states in *The Journal of the American Medical Association*.

"The mixture," he says, "is nonirritating to the skin and may be painted between the toes several times a day. . . . The sock may be replaced immediately without danger of corrosion. There is no discoloration of the clothing. Relief from itching is immediate. . . . It should be pointed out, however, that the phenol-camphor preparation should not be applied to the wet skin, since water causes a breakdown of the preparation with the result that it becomes caustic.